

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 10625640 FILING DATE 13

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2	1					
3	1					
4	1					
5	1					
6	5					
7	①					
8	②					
9	③					
10	④					
11	1					
12	1					
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TOTAL IND.	3	↓			
TOTAL DEP.	13	←	↓	←	↓
TOTAL CLAIMS	16	↓	↓	↓	↓

	IND	DEP	IND	DEP	IND	DEP
51						
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TOTAL IND.		↓			
TOTAL DEP.		←	↓	←	↓
TOTAL CLAIMS		↓	↓	↓	↓